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TO:	PHONE #:	FAX #:
Mail Stop Amendment Examiner C. Delacroix-Muirhead - Art Unit 1614 U.S. Patent and Trademark Office	(571) 272-0572	(703) 872-9306

From : Stephen E. Reiter *SR*  
Email Address : sreiter@foley.com  
Sender's Direct Dial : 858.847.6711  
Date : August 25, 2004  
Client/Matter No : 071243-1404  
User ID No : 1877

**MESSAGE:****OFFICIAL**

U.S. Patent Application No. 09/937,840

Following are:

Amendment Transmittal (3 pgs.);  
Response (13 pgs.);  
Replacement Abstract (1 pg.).

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Atty. Dkt. No. ABI1550-1 (071243-1404)

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

AUG 25 2004

Applicant: Soon-Shiong and Desai

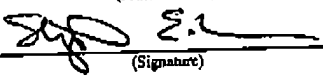
Title: LONG TERM  
ADMINISTRATION OF  
PHARMACOLOGICALLY  
ACTIVE AGENTS

Appl. No.: 09/937,840

Filing Date: 1/28/2002

Examiner: C. Delacroix-Muirhead

Art Unit: 1614

<b>CERTIFICATE OF FACSIMILE TRANSMISSION</b> I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.	
Stephen E. Reiter (Printed Name)	
 (Signature)	
August 25, 2004 (Date of Deposit)	

AMENDMENT TRANSMITTAL

Mail Stop Amendment  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

☐ Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous  
 assertion of Small Entity status.

☐ Assertion of Small Entity status is enclosed.

☒ The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	20	-	21	=	0	x	\$18.00	=	\$0.00
Independent Claims:	5	-	5	=	0	x	\$86.00	=	\$0.00

Atty. Dkt. No. ABI1550-1 (071243-1404)

First presentation of any Multiple Dependent Claims: +	\$290.00	=	\$0.00
0	CLAIMS FEE TOTAL	=	\$0.00

- ☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/> Extension for response filed within the first month:	\$110.00	0	\$0.00
<input type="checkbox"/> Extension for response filed within the second month:	\$420.00	0	\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$950.00	0	\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,480.00	0	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,010.00	0	\$0.00
EXTENSION FEE TOTAL:			\$0.00
<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00	0	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:			\$0.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):			\$0.00
TOTAL FEE:			\$0.00

- ☐ Please charge Deposit Account No. 50-0872 in the amount of \$\_\_\_\_. A duplicate copy of this transmittal is enclosed.
- ☐ A check in the amount of \$\_\_\_\_ is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such

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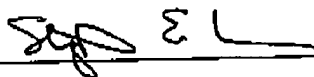
extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to  
Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address  
indicated below.

Respectfully submitted,

Date: August 25, 2004

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By  \_\_\_\_\_

Stephen E. Reiter  
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Registration No. 31,192